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	respondence including the P d below or directed otherwis	arent ailvan	ee arders and not	ification	a of maintenance tee:	ired). Blocks I through 5 sh s will be mailed to the currer ress; and/or (b) indicating a s	il correspondence address		
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23575 7590 05/02/2008					papers, Each additional paper, such as an assignment or formal drawings, must have its own certificate of mailing or transmission.				
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					Vincent A.	CORTEGE	(Depositor's name)		
						Malto	(Signature)		
					TULY 15,20	.8	(Date)		
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/782,465 02/19/2004 RALPH ALTMA					N	03294-PA-CIP	4846		
TITLE OF INVENTION: FL	Y ASH TREATMENT BY IN S	SITU OZONE	GENERATION E	MPLOY	YING A VENTURI				
APPLN, TYPE	SMALL ENTITY	ISSUÈ FEE		· P(JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
NON-PROVISIONAL	NO	\$ 1,440.00			\$300.00	\$1,740.00	09/28/2008		
EXAMINER		AR	ART UNIT (LASE-SUBCLASS]			
MAYEKAR, KISHOR			1795		204-164000	_			
1. Change of correspondence of CFR 1,363). Change of corresponde Address form PTO/SB/122 "Fee Address" indication PTO/SB/47; Rev 03-02 or in Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agent) and the names of up to 2 registered patent attorneys or agents. If not name is listed, no name will be printed.								
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
ELECTRIC POWER RESEARCH INSTITUTE, INC. PALO ALTO, CALIFORNIA									
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Government									
4a. The following fee(s) are enclosed: X Issue Fee			4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.						
X Publication Fee (No	X Payment by credit card. Form PTO-2038 is attached.								
Advanced Order - #	The Director is hereby authorized by charge the required fee(\$), or credit any overpayment, to Deposit Account Number								
5. Change in Entity Statu	s (from status indicated abov	/c)	Deposit / total	ii i idiiiis		inico ta o nati copy or ato nati			
a Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27 (g)(2).									
	ublication Fee (if required) will rds of the United Status Patent			ther tha	n the applicant, a regis	tered attorney or agent; or the c	ssignee or other party in		
Authorized Signature	utr	Date 7-15-2008							
Typed or printed name _Jo	Typed or printed name Joseph G. Cumtolo				Registration No. 28837				

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